

## **ABSTRACT**

### **BACKGROUND:**

Fissure in ano is the most common painful condition of perianal region, characterized by longitudinal ulcers affecting the distal part of the anal canal. To reduce the incidence of fecal incontinence, flatus incontinence and recurrence rates Tailored lateral sphincterotomy is used. This study compares the efficacy of tailored lateral sphincterotomy and lateral sphincterotomy in chronic fissure in ano in healing, incontinence rates and recurrence

### **AIM OF THE STUDY**

The aim of this study is to compare outcomes like, fecal incontinence, and recurrence rate in patients undergoing tailored lateral sphincterotomy and traditional lateral sphincterotomy for chronic fissure in ano

### **OBJECTIVE :-**

To derive conclusions that tailored lateral sphincterotomy is a safe effective and flatus incontinence, faecal incontinence, fecal soiling, recurrence rate are less compared to traditional lateral sphincterotomy

### **Methodology:**

Surgery was done under regional anaesthesia, lithotomy position. An incision made in the 3 o'clock position using 15 blade in the intersphincteric groove and turned medially, Internal sphincter palpated and hooked out using aretery forceps. Length of the fissure is measured and the fibres of internal sphincter are cut upto length below the dentate line.

## RESULTS:

Among the 60 patients in our study No patients who underwent tailored lateral sphincterotomy developed flatus incontinence,**with a significant p value( 0.040)**.No patients who underwent tailored lateral sphincterotomy developed fecal incontinence,**with a significant p value( 0.040)**.1 patients who underwent tailored lateral sphincterotomy developed recurrence **with a significant p value( 0.046)**. patients who underwent lateral sphincterotomy the mean pain score on day 1 was 5.6 when compared to the mean score of patient who under went tailored lateral sphincterotomy being 5.6 without significant **p value(p value-0.975)**.Mean pain score on day3 for patients who underwent lateral sphincterotomy was 2.8 when compared to who under went tailored lateral sphincterotomy being 2.7 **without significant p value(p value-0.139)**.Mean pain score on day5 for patients who underwent lateral sphincterotomy was 1.2 when compared to who under went tailored lateral sphincterotomy being 1.2 **without significant p value(p value-0.375)**

## CONCLUSION:

Due to Significant reduction in faecal incontinence, flatus incontinence and recurrence this present study concludes that the tailored lateral sphincterotomy should be used as the primary treatment of choice in the management of Chronic fissure in ano, when compared to conventional lateral sphincterotomy.